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U.S.PTO  
032904

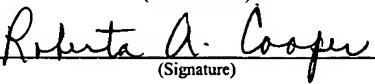
Atty. Dkt. No. 048679-0161

22859 U.S.PTO  
10/8/2019

032904

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Daniel J. Lipscomb et al.  
Title: HOSE COUPLER  
Appl. No.: To be determined  
Filing Date:  
Examiner: To be determined  
Art Unit: To be determined

<b>CERTIFICATE OF EXPRESS MAILING</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.	
EV 431600915 US (Express Mail Label Number)	03/29/04 (Date of Deposit)
Roberta A. Cooper (Printed Name)	
 (Signature)	

**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

Mail Stop PATENT APPLICATION  
Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

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Enclosed are:

Specification, Claim(s), and Abstract (16 pages including cover sheet).

Formal drawings (2 sheets, Figures 1, 2, 3, 4, 5 and 6).

Declaration and Power of Attorney (5 pages).

Application Data Sheet (37 CFR 1.76) (5 pages).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
<b>Basic Fee</b>				\$770.00 =	\$770.00
Total Claims:	31	- 20 = 11	x	\$18.00 =	\$198.00
Independents	3	- 3 = 0	x	\$86.00 =	\$0.00
:					
If any Multiple Dependent Claim(s) present:			+	\$290.00 =	\$0.00
				SUBTOTAL: =	\$968.00
[ ]		Small Entity Fees Apply (subtract ½ of above):		=	\$0.00
				TOTAL FILING FEE: =	\$968.00

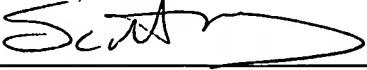
Check number 13851 in the amount of \$968.00 to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 3/29/04

By 

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